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## APPLICANTS

Michael T. Brown, Flemington, NJ; *JW*\*\* CONTINUING DATA \*\*\*\*\* *JW*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *JW*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after		DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i>	Allowance Examiner's Signature <i>JW</i> Initials	NJ	7	20	5

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## TITLE

System and method for sharing contact information

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